## License Type: 34 One Day Beer & Wine License Nontransferable

LICENSE NO. 9542393 Receipt No. 2521863 Fee Paid \$50.00 Geographical Code 1933

APPLICATION:

Pursuant to the authority granted by the organization named below, the undersigned hereby applies for the above designated license(s) for the location also described below.

ORGANIZATION:

HOLLYWOOD FOREVER INC-ENDOWMENT CARE & MEMORIAL CARE

LOCATION ADDRESS:

6000 SANTA MONICA BLVD LOS ANGELES, CA 90038

TYPE OF EVENT:

OTHER EVENT

HR/DATES DURING WHICH

September 8, 2018

ALCOHOL WILL BE SOLD:

5PM-11PM

ESTIMATED ATTENDANCE:

3250

AUTHORIZED REPRESENTATIVE / ADDRESS

JAY BOILEAU

6000 SANTA MONICA BLVD LOS ANGELES, CA 90038

## LICENSE:

The above-named organization is hereby licensed, pursuant to Section 24045.1 of the Business and Professions Code and Rule 59.5 of the California Code of Regulations, to engage in the temporary sale of alcoholic beverages for consumption at the above-named location for the period authorized below. This license does not include off-sale ("to-go") privileges. This license may be revoked summarily by the Department if, in the opinion of the Department and/or the local law enforcement agency, it is necessary to protect the safety, welfare, health, peace, and morals of the people of the State.



Good for 1 day(s). Date Issued September 1, 2018.

Director of Alcoholic Beverage Control

By\_ACC

ISSUANCE DATE

or notice beverage Control				State of Californ
DAILY LICENSE APPLICATION/AUTHORIZA Instructions: Complete all items. Submit to local ABC Division	TION N	an T	Ec	dmund G. Brown Jr., Govern
Instructions: Complete all items. Submit to local ABC District Offic Money Order) payable to ABC. Once license is issued, for company	e with required	fee (Cashier's Check o	LICENSE NUMBER	GEO CODE
Money Order) payable to ABC. Once license is issued, fee cannot be refunded. For a listing of ABC District Offices please visit http://www.abc.ca.gov/distmap.html  Pursuant to the authority granted by the organization named below, the undersigned hereby applies for the license(s) described below.				I SEO CODE
			RECEIPT NUMBER	
			FEE	
1. ORGANIZATION'S NAME			\$	
Hollywood Forever Inc Endowment Care & Memorial Ca	iro : 1	Yes No	DIAGRAM REQUIRED	
2. LICENSE TYPE (Check appropriate license type AND organia)	nization type)	L_INC	Yes	No
a Daily General (\$25.00) (Includes beer, wine and o	distilled spirits		and comment designation of the comment of the comme	
Political Party/Affiliate Supporting Candidate for Public Office or Ballot Measure		Fraternal Organiza	tion in Existence Over I	ive Years
Organization Formed for Specific Charitable 2014			persnip	ive rears
Other:			tion	
Office.		Vessel per Section 24045.10 B&P (\$50.00)		
			NUMBER OF DISPEN	SING POINTS
b.   Special Daily Beer (\$25.00)	Dail. D. a			
Charitable Ersternal Lie		Wine (\$50.00)	Special Da	ily Wine (\$25.00)
Civic	L.	Other:	A	
Amate	ur Sports Org	anization	NUMBER OF DISPENS	SING POINTS
c. Special Temporary License (\$100.00) (Difference)	ent privileges	dam P		
Television Station per Section 24045.2 or 24045.9 B&F	on privileges	depending on statute		
Nonprofit Corporation per Sections 24045.4 and 24045		Person conducting Es	tate Wine Sale per Sectio	n 24045.8 B&P
Other Special Temporary Licenses, per Section	6.6 B&P	Women's Education Section 24045.3 B8	al and Charitable Orga	nization per
License number			news.	
3. EVENT TYPE	Amount \$			
Dinner Dance Wedding Lunch	Picnic	Barbeque		
Sports Event Concert Birthday Mixer	Carnival	D: D	ocial Gathering	Festival
4 TOTAL # OF DAVE		Dinner Dance OCC CE SALES, SERVICE AND/OR C	other: classic for s	creening
From	:00pm		T 44.00	D.
7. EVENT DATE(S) Saturday 09.08.2018	8. E	VENT IS OPEN TO THE PUBL	To 0 11:00pm/	
EVENT LOCATION (Give facility name, if any, street number and name, and city)			90038 LAMen	>2- F
Hollywood Forever Cemetery - 6000 Sonto Man	: DI   I		COROLLO	18
Hollywood Forever Cemetery - 6000 Santa Mon	ica Biva, L	os Angeles, CA	90038 Anoe	'A-
Yes No classic film: SCRFAM		SECURITY GUARDS	Ctro	900 Co.
13. AUTHORIZED REPRESENTATIVE'S NAME		103	it yes, how	nany?
Jay Boileau			14. REPRESENTATIVE'S	S TELEPHONE NUMBER
15. REPRESENTATIVE'S ADDRESS 6000 Santa Monica Blvd, Los Angeles, CA 90038				
16. ORGANIZATION'S MAILING ADDRESS (If different from #15 above)				
17. AUTHORIZED REPRESENTATIVE'S SIGNATURE			18. DATE SIGNED	
PROPERTY OWNER APPROVAL BY (Name), REQUIRED PHONE NUMBER		Innones	08.24.2018	
Yogu Kanthiah		PROPERTY OWNER SIG	NATURE	DATE SIGNED
LAW ENFORCEMENT APPROVAL BY (Name), IF APPLICABLE PHONE NUMBER		LAW ENFORCEMENT SI		08.24.2018 DATE SIGNED
CAPO ( SALWWSE, # ZYYE)		& Sout		8/27/18
DISTRICT OFFICE APPROVAL BY (Name)		ARC EMPLOYEE SIGNA	THE	7//

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ABC EMPLOYEE SIGNATURE

This license may be revoked summarily by the Department if, in the opinion of the Department and/or the local law enforcement agency, it is necessary to protect the safety, welfare, health, peace and morals of the people of the State.